

WASHINGTON DC VETERANS AFFAIRS MEDICAL CENTER

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Updated November 2021

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Introduction

Welcome to the Washington DC VA Medical Center. We appreciate that applying for practicum training can be a challenging process and we are excited that you are interested in our program. It is our sincere hope that this brochure provides you with the information that you need to make a well-informed decision regarding your future training at our medical center. Biographies of the Staff Psychologists can be found in our Training Handbook, which is accessible via our Training Programs Webpage Psychology Training Programs | VA Washington DC Health Care | Veterans Affairs .

Philosophy of Training

In our program, we view it as our mission to support psychology trainees in developing their individual identities as psychologists while ensuring they possess the necessary skills and competencies to advance towards independence. Two areas our program highlights are diversity/inclusion and program evaluation/program development. Our program attends to and values the diversity reflected in our staff, trainees, and the veterans we serve, and emphasizes the importance of preparing psychology trainees to deliver patient centered, evidence-based psychological services that incorporates individual and cultural diversity at all aspects of assessment, treatment planning, and intervention.

Diversity Statement

The Washington DC VA Medical Center Psychology Training program places diversity and inclusion at the core of our training philosophy. We take very seriously our responsibility to contribute to the development of psychologists who are prepared to provide patient centered, evidence-based treatment to individuals of diverse, intersectional identities. We promote diversity at every level within our training program and under the larger umbrella of the Mental Health Service Line (MHSL) in which our training program operates. We believe that selecting the country's top talent for trainees and for staff positions from all groups within our communities helps us better serve the Veterans with whom we work and gives us the high-level skill set we need to work with such a complex population.

Our training program recruits practicum students from local universities, including American University, Catholic University of America, Divine Mercy University, Gallaudet University, Howard University, George Mason University, The George Washington University, Loyola University, The Chicago School of Professional Psychology, University of Maryland Baltimore County, University of Maryland College Park, and Uniformed Services University of Health Sciences. As a federal employer, the DC VAMC strictly follows all EEOC policies on fair recruitment and other personnel practices.

We aim to take diversity beyond mere representation of different identities towards authentic inclusion. We recognize that gains with regards to representation of diverse groups in our training program will not be sustained if our work environment does not promote engagement of all team members. We are committed to recognizing and celebrating the intersecting identities of our practicum students and staff; working to create brave spaces in didactics and supervision where challenging conversations about practicing psychology in a diverse world can occur.

Washington DC VA Medical Center

All practicum training experiences takes place at the Washington DC VA Medical Center (DC VAMC) and its five surrounding Community Based Outpatient Clinics (CBOCs). Located in the nation's capital, the DC VAMC is among the most visible and dynamic facilities in the entire VA system. The DC VAMC is under the authority of the Veterans Health Administration (VHA), which is the part of the U.S. Department of Veterans Affairs that is responsible for providing health care for Veterans, as well as funding health research and training for health care providers. Veterans seen at the DC VAMC have served in various military conflict eras, including Operation Iraqi Freedom/Operation Enduring Freedom/Operation New Dawn (OIF/OEF/OND), Kosovo, Bosnia, Desert Storm/Desert Shield, Lebanon, the Vietnam War, the Korean War, and World War II. The DC VAMC also serves Veterans who experienced noncombat traumas, including Military Sexual Trauma (MST), training accidents, and responses to natural disasters.

The DC VAMC is a comprehensive medical center that treats Veterans of all genders who have a wide array of medical and psychiatric needs in both inpatient and outpatient settings. The DC VAMC is a tertiary care, Complexity Level 1B facility. The DC VAMC is part of the Veterans Integrated Service Network (VISN) 5; VISN 5 includes the Baltimore VAMC, Beckley VAMC, Huntington VAMC, Louis A. Johnson VAMC, Loch Raven VA Community Living and Rehabilitation Center, Martinsburg VAMC, Perry Point VAMC, and Washington DC VAMC. The DC VAMC is also the designated Polytrauma Network Site for VISN 5.

The Practicum Training Experience

The DC VAMC offers formal practicum placements for the academic year. Practicum experiences can start in the summer or fall, and generally last through the spring semester of the academic year, depending on the needs of the student, the clinical program, and supervision availability. Most supervisors prefer that practicum students begin in the summer and continue through the academic year. **The program does not provide a singular summer practicum training experience.** Applicants should be in good standing with their academic institutions and should be from an APA, CPA or PCSAS accredited, doctoral degree program

clinical or counseling psychology. We must also have an academic affiliation agreement with the student's doctoral program on file prior to the student onboarding. We have standing academic affiliation agreements with most graduate programs in the Washington DC area. Requests for agreements with programs outside of the Washington DC area are reviewed on a case-by-case basis. We cannot accept students who are in terminal, master's degree programs even if their program is accredited by CACREP.

Practicum students are held to many of the same appointment standards as staff, to include: pre-placement fingerprinting, background checks, and required health verifications. Selection decisions are contingent on passing these screens. The DC VAMC also conducts drug screening on randomly selected personnel. Although practicum students are not required to be tested before beginning their externship, they may be subject to random selection during the practicum year, and will experience the same consequences as staff, should a random test be positive.

Didactic Training

In addition to didactic opportunities provided within clinical placements, practicum students receive weekly didactics as part of the practicum didactic series. Currently, an extern attends didactics on either Tuesdays or Thursdays between 8am and 8:50am. Topics may include ACT, Diversity Seminar, Intern panel discussion to address internship readiness and professional development, Motivational Interviewing, Post-doctoral Fellow presentations (based on area of interest), Suicide Prevention, and Traumatic Brain Injury.

Tiered Supervision and Mentorship

Our site hosts both internship and fellowship programs. Both programs are designed to foster competency in supervision provision. For this reason, practicum students may receive some supervision from either an intern or fellow, with guidance from a licensed staff psychologist. This supervision may take a variety of forms, from direct individual supervision, to cofacilitation of group interventions or collaborative supervision provided by a licensed provider and fellow. In these relationships, the licensed provider remains responsible for all patient care, and will seek input from the supervising intern/fellow when completing any evaluation forms on behalf of the practicum student.

In addition to our tiered supervision, practicum students have the opportunity to be mentored by psychology interns or postdoctoral fellows. Mentorship is a separate, non-evaluative relationship designed to foster the ongoing professional development of the mentee. At the start of the year, we will solicit interest on the part of both potential mentors and mentees and work to facilitate initial mentorship pairings.

COVID 19 and Practicum Placements

As the COVID-19 pandemic continues, our site has been very fortunate to have the capacity to allow flexibility with regards to use of telehealth and telework at all levels of training. We anticipate that in the coming year, we will have increased return to onsite work for both staff and trainees, and that we will continue to provide both face to face and telehealth services to our Veterans. All decisions about presence on site will be made following the guidance of our medical center leadership, local public health agencies, and accrediting bodies and with a focus on maintaining the health of our trainees, staff, and the Veterans we serve. When working on site, you will be provided with any necessary PPE.

As trainees at our site, you will be required to follow VA policies regarding vaccination against COVID, just as all health professions trainees must abide by VA policies related to other immunizations for public health. You and your DCT will need to attest to your fitness for duty on station prior to the start of the training year, using the Trainee Qualifications and Credentials Verification List (TQCVL).

Clinics Accepting Practicum Students

The following pages highlight the practicum training opportunities available at the DC VAMC. Currently, these clinics/teams plan to accepting practicum students in 2022-2023.

- Community Living Center
- Community Based Outpatient Clinic (CBOC)
- Health Psychology
- Mental Health Clinic
- Neuropsychology
- Polytrauma
- Primary Care-Mental Health Integration
- Psychosocial Rehabilitation and Recovery Center
- Substance Abuse Rehabilitation Program
- Trauma Services Program

Community Living Center

This placement is open to students with 1 or more years of doctoral level practicum experience.

The Community Living Center (CLC) is the home for Veterans within the DC VA medical center. Its primary goal is to optimize function and improve or maintain the quality of life of residents across the adult lifespan and with varying levels of cognitive functioning. Interdisciplinary integrated care teams, including psychology, psychiatry, physical therapy, occupational therapy, speech therapy, recreation therapy, medicine, alternative medicine, nutrition and food services, and recreation and creative arts, collaborate to provide care for our Veterans. We provide a wonderful training experience for those interested in developing and enhancing skills with geriatric and rehab Veteran populations in one of our three inpatient programs: hospice palliative care, long-term care, and rehabilitation. The rehab program provides short-term rehabilitation care for post-acute medical illness and injury, such as wound care, intravenous therapy, stroke, joint replacements, and debilitation from ailments (e.g., pneumonia, cancer, etc.). Inpatient polytrauma is included in this program. The long-term care program involves intermediate and skilled nursing home care to eligible Veterans. Veterans in this program tend to be service connected and live in the CLC as their permanent home. These residents typically have multiple chronic medical problems, and may also present with mental health needs such as PTSD, depression related to medical illness, adjustment disorders, or dementia. The inpatient palliative care unit focuses on holistic, comfort-oriented care for the terminally ill veteran and his or her family. The focus is on pain reduction and maximizing function as well as quality of life. The role of mental health in this setting is to work alongside medicine, nursing, and Chaplain Services to support the veteran and family caregivers in managing chronic illness and/or end of life care.

The main training goal of this rotation is to prepare students to provide interventions to Veterans across the life span who meet the full range of medical and mental health issues in a long-term care setting. Training opportunities may include: brief and/or long-term individual or group therapy using cognitive-behavioral, ACT, motivational interviewing, narrative, reminisce, and other evidenced based and non-pharmacological interventions; cognitive, psychological, and neuropsychological assessment; decision-making capacity evaluations; managing disruptive behavior associated with dementia using STAR-VA or other behavioral interventions; collaborating with staff members as part of an interdisciplinary team; providing staff training on relevant topic areas; and more. Services are provided in-person as well as via video or telephone.

Community Living Center Supervisors

Dr. Chanda Corbett
Dr. Lindsay Gerolimatos

Community Based Outpatient Clinic (CBOC)

This placement is open to students without prior doctoral level practicum experience

(rising 2nd year graduate students)

Several CBOCs in Virginia and Maryland provide mental health and medical services to Veterans (age range between early 20's and late 70's) who live or work near the location of the clinic. Patients typically receive all or some of their healthcare here and receive more specialized care via telehealth or at the main Veterans Affairs Medical Center. Trainees with interest and experience in the diverse strengths and needs of racial and ethnic minority people are encouraged to apply.

Two CBOC's that are accepting applications for the 2022-23 Training Year are listed below:

- Fort Belvoir CBOC VA clinic located on the base at Fort Belvoir
- Southern Prince George's CBOC located in Suitland, Maryland near Joint Base Andrews.

The main training goal of this rotation is to prepare practicum students to learn appropriate interventions to treat individuals with the broad range of psychological disorders typically encountered in a multi-disciplinary outpatient mental health clinic. Psychology externs will have an opportunity to provide individual (approximately 6 weekly clients) and group (approximately 1-2 weekly groups) therapy, diagnostic interviews, and psychoeducation to Veterans seeking care for a wide range of presenting concerns, including mood disorders, trauma-related disorders (including PTSD), anxiety disorders, and adjustment disorders. Externs might also gain experience with Veterans who have psychotic disorders, substance use disorders, and personality disorders. Mental health services at the CBOC are developing based on patient needs and include evidence-based treatments for depression and anxiety. Externs will likely conduct both face-to-face and telehealth treatment formats.

CBOC Psychology Supervisors:

Dr. Tom Gilmore (Southern Prince George's CBOC)

Dr. Harry McCleary (Ft. Belvoir CBOC)

Health Psychology

This placement is open to students with 1 or more years of doctoral level practicum experience.

The specialty of Clinical Health Psychology focuses on applying biopsychosocial knowledge of health and disease to promote physical and mental well-being. The health psychology externship at the Washington DC VAMC is designed to give students broad-based health psychology training. Trainees will gain experience in evidence-based practice interventions geared toward helping veterans with a range of concerns including adjusting to a new medical condition, non-pharmacological management of chronic medical conditions, and medical adherence issues.

At the Washington DCVAMC, health psychologists play an integral role within interdisciplinary teams in the Infectious Diseases (ID) Clinic and the Neurology Department, and work on hospital wide health promotion initiatives. The ID clinic is an integrated primary care setting for veterans with HIV. In this clinic, externs conduct brief intake assessments, cognitive screens (for HAND) and provide problem focused therapy to support Veterans' overall well-being, adjustment to HIV diagnosis and mild to moderate mental health concerns. In Neurology, externs receive thorough training in behavioral sleep medicine, and have opportunities to learn interventions to address chronic migraines.

These two core experiences build a foundation in both group and brief individual behavioral health interventions and offer opportunities for externs to learn about interdisciplinary professional consultation. In addition to these experiences, externs can participate in presurgical bariatric assessments, facilitate group-based weight management intervention and observe presurgical transplant assessments. Opportunities also exist to contribute to new health promotion initiatives.

Health Psychology Supervisors

Dr. Michelle Siegel Dr. Joshua Johnson Dr. Chelita DuBois

Mental Health Clinic

This placement is open to students with 1 or more years of doctoral level practicum experience.

The Mental Health Clinic (MHC) is a multidisciplinary outpatient program that offers medical, psychiatric, and social work services to Veterans from a range of conflict eras who hold diverse race, gender, sexual orientation, and cultural identities. Veterans are most often referred to MHC Psychology for evidence-based psychotherapy by Primary Care Mental Health Integration (PCMHI), MHC Psychiatry, and other mental health treatment programs in the medical center.

Practicum students in the MHC provide individual and group psychotherapy and will deepen their knowledge in and application of multiple evidence-based psychotherapies for a variety of clinical presentations:

- **Depression**: CBT for Depression
- Affect Regulation: CBT for Anger Management, DBT Skills
- Serious Mental Illness: CBT for Psychosis
- **Behavioral Health Challenges**: CBT for Chronic Pain, CBT for Insomnia, Problem-Solving Therapy
- Anxiety: CBT for Generalized Anxiety Disorder, CBT for Social Anxiety, Unified Protocol for Transdiagnostic Treatment of Emotional Disorders
- **PTSD**: Skills Training in Affective and Interpersonal Regulation (STAIR), Written Exposure Therapy

Clinical responsibilities include carrying a caseload of 6 – 7 individual patients, co-facilitating 1 – 2 psychotherapy groups, and conducting 1 – 2 initial treatment planning sessions with Veterans new to the MHC Psychology Clinic. Practicum students will likely conduct both inperson and telehealth treatment. Of note, a placement in the MHC allows for the unique opportunity to gain experience implementing multiple EBPs with optimal protocol adherence and fully consistent with the National EBP Program guidelines.

In addition, there will be opportunities to hone skills in case conceptualization and corresponding treatment planning through incorporation of a patient's values to meet individual goals. Although practicum students do not complete comprehensive psychological assessments as part of this training experience, they will regularly administer assessment measures (e.g. PHQ-9, DERS, ISI, PCL-5, GAD-7) to evaluate treatment progress.

MHC Psychology Supervisors:

Dr. Kwesi Dunston Dr. Julie Rones

Neuropsychology

This placement is intended for practicum students with at least one year of previous practicum experience in neuropsychology.

Neuropsychological evaluations are often provided to Veterans who are experiencing decreased cognitive functioning, including short or long-term memory loss, attention problems, language impairment, perceptual difficulties, and problem-solving deficits. Evaluations are used to clarify diagnosis, determine etiology of impairment, quantify functional loss, monitor changes in cognitive functioning as a result of treatment, and determine baseline level of cognitive functioning. Common referral diagnoses include mild cognitive impairment, dementia, concussion/TBI, multiple sclerosis, cerebrovascular disease, HIV and other infectious diseases, and neurocognitive concerns associated with psychiatric disorders. In addition to diagnostic impressions and description of functional loss and cognitive strengths, evaluation reports include detailed treatment recommendations.

The goal of this rotation is to provide practicum students with well-rounded training in all aspects of neuropsychological evaluation and consultation. Training will be tailored to meet the needs and interests of the extern. Practicum students will be trained in all aspects of neuropsychological evaluation, including clinical interviewing, test administration, test scoring, interpretation, and report writing. A flexible battery approach is used with test selection based on referral issue and age of patient. Practicum students will primarily conduct outpatient evaluations (on average, one per week) and may have opportunities to conduct inpatient evaluations. Currently, the Neuropsychology Clinic is conducting approximately 75% of evaluations in a traditional, face-to-face format with use of PPE and other covid transmission mitigation measures and 25% of evaluations via video telehealth. Therefore, practicum

students will gain experience with both face-to-face and telehealth assessment. Additionally, there are often opportunities to participate in testing feedback sessions with Veterans and their family members, which consists of reviewing test results, discussing diagnoses, and providing treatment recommendations. All feedback sessions are currently conducted virtually (via video telehealth or phone). Opportunities exist to attend neurology grand rounds, brain cuttings, and other relevant didactics. Opportunities for training in neurocognitive rehabilitation, either in an individual or group format, also may be available.

Neuropsychology Supervisors

Dr. Ernest Aucone Dr. Jennifer Strang

Dr. Lauren Skalina

Polytrauma Clinic

This practicum placement is a half-time (8hour) opportunity for students at any level of doctoral training.

As a Polytrauma Network Site, DC VAMC provides specialized services to Veterans who have sustained injuries to multiple organ systems, often including a traumatic brain injury. The frequency and unique nature of polytraumatic injuries resulting from exposure to blasts, particularly during OIF/OEF/OND, has created the need for specialized interdisciplinary rehabilitation programs that can handle the complex medical, psychological, rehabilitation and prosthetic needs of these individuals. Polytrauma services are carefully coordinated with other services required for comorbid conditions including, but not limited to PTSD, complex trauma, amputation, auditory and visual impairments, spinal cord injury and other medical or mental health problems.

This rotation is intended for externs who are interested in blending exploratory and supportive more directive approaches such as **EBPs** and neurocognitive rehabilitation techniques, to work with Veterans adjusting to TBIs, disability and/or co-morbid PTSD. Possible training opportunities include conducting individual psychotherapy such as trauma-focused therapy and CBT-I, as well as co-leading groups such as an ACT group, a mood management group based on DBT and CBT interventions, a meditation group, and cognitive rehabilitation groups such as Brain Boosters. Opportunities to participate in interdisciplinary team meetings and rehabilitation grand rounds are also available, as is weekly group supervision with other Polytrauma psychology trainees. No prior experience in a rehabilitation setting is required, but externs should be generally familiar with psychotherapeutic interventions. This clinic is not currently offering opportunities for psychological or neuropsychological assessment.

Polytrauma Psychology Supervisor

Dr. Scott Levson

Primary Care-Mental Health Integration (PC-MHI)

This placement is open to students with 1 or more years of doctoral level practicum experience

PCMHI is part of Patient Aligned Care Teams (PACT), which provides integrated health services that are both comprehensive and preventative in nature. The foundation of PACT is the Integrated treatment team, on which psychologists have traditionally played central roles as a Behavioral Health Consultant for Primary Care Providers and their patients. PC-MHI serves Veterans with mild-to-moderate symptom distress and/or concerns in the areas of stress management, weight management, chronic pain, insomnia/CPAP adherence, smoking cessation, grief, relationship difficulties, and mild-to-moderate alcohol consumption. PC-MHI also performs initial screens for PTSD. The experience is fast-paced, and trainees will be exposed to a variety of different presenting issues and relevant treatment approaches.

Trainees will have an intensive experience in the co-located, collaborative care model. They will sit in or near the Primary Care clinics, allowing for as-needed consultation with PCPs, Psychiatrists, Nurses, and Pharmacists. At the Washington DC VA Medical Center, PC-MHI serves as the initial point of entry into behavioral health services, and often serves to destigmatize behavioral health care. Training experiences include:

PC-MHI Work Flow: Trainees will be trained in the 30-minute PC-MHI Behavioral Consultation model. They will have scheduled patients for brief assessments in which they will clarify if the veteran's needs can be met within a consultative approach within PC-MHI or, if they require, follow-up with specialty behavior healthcare counseling and/or Psychiatry. If patients are seen for follow-up consultation/psychotherapy within PC-MHI, trainees will see patients for up to 5 sessions. Trainees will also have same-day capacity in their schedule for warm handoffs from PCPs, in which they will develop skills for rapidly arriving at a general diagnosis and initial treatment planning with the veteran.

Interprofessional Consultation: The PC-MHI rotation provides opportunities for practicum students to provide mental health services to veterans alongside Psychiatrists, PCPs, Nurses, Pharmacists, and trainees from other disciplines.

Modalities: PC-MHI utilizes brief evidence-based interventions including adaptations of CBT for Depression, Anxiety, Insomnia, Chronic Pain; Prolonged Exposure; Problem Solving Training; Motivational Interviewing; and Mindfulness and Acceptance approaches. Standardized screenings are administered at initial sessions (e.g., Patient Health Questionnaire-9, Generalized Anxiety Disorder-7, Primary Care PTSD-5, AUDIT-C) to assist with assessment and treatment planning. Tailored measurement-based care (e.g., Patient Health Questionnaire-9, Generalized Anxiety Disorder-7, PTSD Checklist, Insomnia Severity Index, Chronic Pain measures, and Quality of Life measures) is used to evaluate treatment progress during the course of the Veteran's consultation sessions.

Collaboration with Group Therapists: Trainees may have the opportunity to collaborate with PC-MHI staff or other clinic staff in facilitating psychotherapy groups, including the Race-Based Stress and Trauma Coping group, COVID-19 Stress Management Group, or the Behavioral Health Skills Group.

Program Evaluation and Development: Trainees may become involved in Staff Psychologists' Program Evaluation and Development activities, which involves reviewing a specific clinic process within the context of VHA strategic priorities and developing recommendations for quality improvement.

PCMHI Psychology Supervisors:

Dr. Eryka Boyd

Dr. Nicole Cammack

Dr. Sonia Mims

Dr. Mauli Shah

Psychosocial Rehabilitation and Recovery Center (PRRC)

This placement is open to students with 1 or more years of doctoral level practicum experience

The PRRC is a dynamic and intensive outpatient program that provides tele-mental health and face-to-face group and individual therapy services to Veterans who are diagnosed with a serious mental illness (e.g., Bipolar Disorder, Major Depressive Disorder, Post-traumatic Stress Disorder, Schizophrenia).\ Veterans may also present with co-morbid substance use issues, personality disorders, and additional mental health diagnoses. PRRC externs have the valuable opportunity to work closely with a multi-disciplinary team consisting of staff and trainees from psychology, nursing, peer specialists, recreation therapy social work and chaplain services. — to provide recovery-oriented care to a Veteran population that is diverse in race/ethnicity, age, gender, sexual orientation, socioeconomic status, cognitive/physical functioning, and clinical presentation. PRRC externs are actively involved in daily staff meetings and receive approximately 2-3 hours of weekly individual and group supervision from PRRC psychology fellows and PRRC staff psychologists. On a weekly basis, PRRC externs typically co-facilitate between 4-5 groups in the PRRC program and inpatient unit, and PRRC externs meet with approximately 2-3 Veterans for individual therapy.

As many Veterans enrolled in the PRRC program present with concerns related to suicidality, PRRC practicum students have the unique opportunity to develop their suicide assessment skills, including receiving extensive training in the administration and interpretation of the Columbia – Suicide Severity Rating Scale and the Veterans Affairs Comprehensive Suicide Risk Evaluation. Trainees also collaborate with Veterans to develop detailed safety plans and can consult with PRRC staff and members of the Suicide Prevention Program to discuss risk/protective factors and acute/chronic risk to determine whether a higher level of mental

health care (e.g., inpatient admission) is clinically warranted. Furthermore, practicum students can conduct comprehensive suicide risk assessments using the Collaborative Assessment and Management of Suicidality (CAMS) framework.

Currently, practicum students have the opportunity to co-facilitate the following PRRC telemental health groups: Acceptance and Commitment Therapy, Anger Management, Cognitive Behavior Therapy for Anxiety, Cognitive Behavior Therapy for Depression, Coping with Voices and Paranoia, Cultural Acceptance and Racial Empowerment, Dialectical Behavior Therapy Skills, Ending Self-Stigma, Grief and Loss, Men's Group, Mindfulness, Self-Compassion, Skills Training in Affect and Interpersonal Regulation, Suicide Prevention, and Women's Group. Based on the needs of the PRRC and a trainee's clinical interest, practicum students will also have the opportunity to develop and co-facilitate a new PRRC group. Extensive training is provided to PRRC practicum students on learning to effectively co-facilitate tele-mental health groups (currently, 40 PRRC telehealth groups, using WebEx, are available for Veterans to attend weekly, with group sizes ranging between 5 and 40 Veterans per group). Externs will also have the opportunity to co-facilitate Cognitive Behavior Therapy Skills Groups on the Acute Psychiatry Inpatient Unit.

PRRC practicum students will develop their clinical application of various evidence-based psychotherapy treatments in time-limited (i.e., up to 12 sessions) individual therapy. Trainees will collaborate with Veterans to develop specific recovery goals to address in individual therapy and will assist Veterans with reinforcing skills that they are learning in PRRC groups. Practicum students will also have the opportunity to apply various measurement-based instruments (e.g., Beck Anxiety Inventory, Beck Depression Inventory, Beck Hopelessness Scale, Patient Health Questionnaire, PTSD Checklist) to evaluate treatment progress during the course of the Veteran's individual therapy treatment. Trainees will work closely with the PRRC multi-disciplinary team to ensure Veteran-focused and recovery-oriented mental health transition plans for Veterans who they are working with in individual therapy.

PRRC practicum students also have the opportunity to work closely with Veterans by completing longitudinal measurement-based care clinical interviews that assess community functioning, self-reported disability, internalized stigma, Veteran satisfaction, and well-being; engage in monthly PRRC Community Meetings; actively participate in weekly National PRRC conference calls; and collaborate with psychology staff to engage in program development initiatives. In addition to the weekly extern didactic series, practicum students will have the opportunity to engage in additional PRRC-related trainings/didactics/webinars based on the practicum student's interest and availability. Moreover, the PRRC psychology staff have developed an extensive virtual resource library of evidence-based psychotherapy manuals and resources, and PRRC practicum students will have the opportunity to engage in self-study to further develop their clinical skills.

Advanced Practicum Experience: An advanced psychology practicum experience is available for an extern who has completed **one academic year of clinical training in PRRC**. A student

selected for this advanced training year will have the opportunity to continue to develop individual and group psychotherapy skills in evidence-based treatments. In addition, advanced practicum students will have the opportunity to complete a mini-rotation (i.e., approximately 4-6 hours per week) in the Trauma Services Program (TSP), where they conduct comprehensive trauma-informed evaluations and engage in trauma-informed individual and group therapy. An advanced practicum student can also choose to enhance his or her program development and research skills by working with staff in the PRRC and/or Trauma Services Program. An opportunity may also be available to provide clinical supervision and mentoring of trainees and to receive hierarchical supervision from psychology fellows and/or staff psychologists. Additional opportunities not listed here (e.g., development of additional didactics to provide to incoming trainees, opportunity to collaborate with PRRC staff to prepare for accreditation surveys, assist with additional program development initiatives) may be considered.

PRRC Supervisors:

Dr. Corinne Galgay

Dr. Peter Phalen

Dr. Parin Zaveri

Substance Abuse Rehabilitation Program (SARP)

This placement is open to students without prior doctoral level practicum experience (rising 2nd year graduate students)

Rotations typically begin in June and terminate at the end of May/early June of the following year (some flexibility may be possible with these dates).

SARP is a 10-week long, intensive outpatient substance abuse program that uses a multidisciplinary team (e.g., psychologists, social workers, psychiatrists, recreational therapists, addiction therapists, peer support specialists, clinical nurse specialists) to treat Veterans. SARP offers a dynamic patient population, serving Veterans who typically range from 22 to 80+ years old. Typical substances of abuse include alcohol, opioids, cocaine, PCP, marijuana and prescription medications. In addition, many Veterans referred to SARP often struggle with an array of co-occurring psychiatric disorders – including Major Depressive Disorder, PTSD, Schizophrenia, Bipolar Disorder, and Personality Disorders, as well as psychosocial issues (such as legal charges, homelessness, unemployment and relationship dysfunction), and various medical conditions associated with substance use (chronic pain, HIV and Hepatitis C).

The primary training goal is to prepare practicum students to treat alcohol and drug misuse, as well as co-occurring disorders, in a multidisciplinary setting. Practicum students can provide individual therapy and group therapy, with trainee generally seeing 5-6 individual patients and co-leading 1-2 psychoeducation/process groups (e.g., CBT and Depression) per week. Although practicum students primarily work from a cognitive-behavioral therapy framework, they have the opportunity to learn additional evidence-based practices, including Motivational Interviewing (MI), Acceptance and Commitment, and Relapse Prevention. Practicum students

also participate in biweekly didactics focusing on topics including substance use disorders, Motivational Interviewing, professional development, and internship preparation. Finally, practicum students work closely with their clinical supervisor (which may also include interns and post-doctoral fellows) to develop an individualized training plan that meets their training needs and interests as well as the needs of our veterans.

SARP Psychology Supervisor:

Dr. Leonard Tate

Trauma Services Program (TSP)

The Trauma Services Program (TSP) is an outpatient clinic that provides treatment for PTSD to Veterans from all eras of service. TSP trains externs to accurately diagnose PTSD and related conditions, to create a comprehensive treatment plan, to provide effective treatment, and to be aware of and implement current PTSD research, all within a trauma informed treatment approach.

Practicum students can learn a variety of individual therapy and group therapy interventions for PTSD that are evidence based and evidence informed. Therapies provided in the Trauma Services program include Cognitive Processing Therapy (CPT), Prolonged Exposure (PE), and Written Exposure Therapy (WET), and a number of other therapeutic modalities (e.g., ACT, STAIR, etc.). Students can generally expect to conduct, on a weekly basis, four hours of assessment and/or treatment planning sessions and meet individually with 3-5 individual therapy clients. Externs will also co-lead at least one therapy group during the course of their externship. Externs participate in clinical meetings, didactics, and supervision. Some externs may also be supervised by a postdoctoral fellow for part of their caseloads. Externs can serve either in the DC VAMC or in one of our CBOC (Community Based Outpatient Clinics). Externs work closely with their clinical supervisor to develop an individualized training plan that meets their training needs and interests as well as the needs of our Veterans.

TSP Psychology Supervisors:

Dr. Aparna Arjunan

Dr. Ranon Cortell

Dr. Matt Dickson

Dr. Amanda Evans

Dr. Steph Guedi

Dr. Erica Peppers

Dr. Lauren Rothstein

Dr. Lilli Salky

Dr. Carolyn Weiss

Dr. Erika White

Applying to The Practicum Training Program

To help coordinate the annual offering and accepting of externship placement, our program adheres to the guidelines set forth by The Greater Washington Area Directors of Clinical Training.

Below are guidelines:

- Externships should not exceed 16 hours in a two-day block and should not require externs to take work home.
- Externship directors should inform students of required times that they need to be present at the training facility (e.g., practicum didactic series every Tuesday or Thursday between 8-8:50am) at the time of interviews.
- Individual face-to-face supervision should occur at least 25% of the time that externs spend
 in service-related activities (i.e., treatment, assessment, interviews, report-writing, case
 presentations, and consultations). We require direct observations of externs' servicerelated activities with clients (live or electronically) at least once per semester to comply
 with APA's Observation Standards.
- Both externship directors and students do not attempt to elicit information from each other
 regarding their status or ranking prior to the acceptance* date. Externship directors should
 notify applicants that they are no longer under consideration by the site at the earliest
 possible date in advance of the acceptance date.
- The university/school and the externship training director should complete externship training contracts as early as possible after the acceptance date.** We encourage stipends for externs (Please note that there is no stipend currently offered for practicum training experiences at the DC VAMC).

*At this time, the dates have not been set with regards to coordination of application deadlines and acceptance date. We will update these materials when that information is received.

** The VA has existing training agreements with all local institutions that have been created and approved by the VA's Office of Academic Affiliation. We do not complete additional training contracts with individual programs.

To Apply:

Please email a cover letter and curriculum vitae to the Director of Psychology Training Programs, Dr. Leah E. Squires, at Leah.Squires@va.gov. In your cover letter, please indicate the one clinic that most interests you and detail the specific reasons that you are choosing to apply to that specific clinic. We ask applicants to specify only one clinic because of the large number of applications that the psychology staff receive and need to review. Dr. Squires will forward your application to the staff psychologists associated with the specific clinic that you identify. Please do not send letters of recommendation or sample treatment reports unless a staff member specifically requests these from you.

Conclusion

Thank you for considering our Practicum Training Program. We look forward to reviewing your application. If you have any further questions about the practicum training experience, do not hesitate to email the Director of Psychology Training Programs, Dr. Leah E. Squires, at Leah.Squires@va.gov.

